



IFW

Docket No. 40909/AJ/rg

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Federico NALESSO  
Serial No. : 10/552,730  
Filed : October 11, 2005  
For : "MACHINE FOR PLASMA PURIFICATION COMBINED WITH PLASMA  
ADSORPTION-PERFUSION BY USING A TRICOMPARTMENTAL DIALYZER"  
Group No. : 1724  
Examiner : Still unknown

Office of Initial Patent Examination's Filing Receipt Corrections  
Commissioner for Patents  
U.S.A.

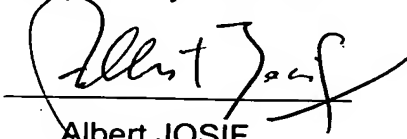
REQUEST FOR CORRECTED FILING RECEIPT

Dear Sirs,

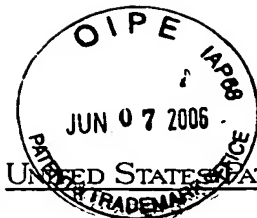
This is to request issuance of a Corrected Filing Receipt according to the amendments highlighted in the enclosed copy.

We also enclose copy of the third page of Declaration/Power of Attorney for your easy reference.

Respectfully submitted

  
Albert JOSIF  
(Reg. No. 22,917)

Milan, Italy - May 31, 2006



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
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APPL NO.	FILING OR 371 (c) DATE	ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLMS	IND CLMS
10/552,730	10/11/2005	1724	450	40909/AJ/ps	3	13	2

CONFIRMATION NO. 9463

30904  
 MODIANO & ASSOCIATE <sup>I</sup>  
 VIA MERAVIGLI 16  
 MILAN, 20123  
 ITALY

## FILING RECEIPT



\*OC000000018790422\*

Date Mailed: 05/15/2006

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please mail to the Commissioner for Patents P.O. Box 1450 Alexandria Va 22313-1450. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s) Padova  
 Federico Nalesso, Padova, ITALY;

Power of Attorney: The patent practitioners associated with Customer Number 30904.

## Domestic Priority data as claimed by applicant

This application is a 371 of PCT/EP04/03788 04/08/2004

## Foreign Applications

## Acceptable Request to Retrieve Priority Application Received?

ITALY PD2003 A 000076 04/16/2003

NO

If Required, Foreign Filing License Granted: 05/12/2006

The country code and number of your priority application, to be used for filing abroad under the Paris Convention, is **US10/552,730**

Projected Publication Date: 08/24/2006

Non-Publication Request: No

Early Publication Request: No

\*\* SMALL ENTITY \*\*

## POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. *(List name and Registration number)*

Albert JOSIF

(Reg. No. 22,917)

Daniel J. O'BYRNE

(Reg. No. 36,625)

SEND CORRESPONDENCE TO:

DIRECT TELEPHONE CALLS TO:

(Name and telephone number)

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20123 MILANO - ITALY

EUROPE

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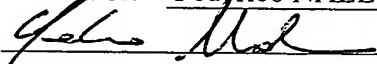
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## DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both under Section 1001 of Title 18 of the United States Code and that such wilful false statements may jeopardize the validity of any patent issued thereon.

## SIGNATURE(S)

Full name of sole or first inventor: Federico NALESSO

Inventor's signature: 

Date : September 29, 2005 Country of Citizenship: ITALY

Residence: Via E. Forlanini, 4 - 35136 PADOVA - ITALY

Post Office Address: Same as residence

Full name of second or joint inventor, if any: \_\_\_\_\_

Inventor's signature: \_\_\_\_\_

Date : \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_

Residence: \_\_\_\_\_

Post Office Address: \_\_\_\_\_

Full name of third or joint inventor, if any: \_\_\_\_\_

Inventor's signature: \_\_\_\_\_

Date : \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_

Residence: \_\_\_\_\_

Post Office Address: \_\_\_\_\_